

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS FILED

05 OCT 28 PM 4: 33

INDEPENDENT/POLITICAL COMMITTEE COVER PAGE

CARRELLA SABAUGH CARRELLA SABAUGH MACOHB COUNTY CLERK MACOHB COUNTY HICHIGAN MAT CLEMENS. FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in link and signed	3 This Statement covers From;	05 to 10 28 05				
by the transurer or designated record temper	3. This Statement covers From: 1 05 To 10 78 05 Mo Day Year Mo Day Year					
1. Committee I.D. Number	4. Committee's Malling Address 3929 HARRISON TWP.	5 RIVERCREST				
13700850	Area Code and Phone (586) 465-15	95				
2. Committee Name	If the address in this box is different from the co	mmittee mailing address on the Statement of				
CIT, FOR RESP. + ETH. GOV.	Organization, mail may be sent to this address I					
5. Tressurer's Name and Residential Address	397 <i>9</i> 9	S RIVERCREST MI 48045				
Area Code and Phone JAMES	ULINSKI 586	- 465 1595				
6. Treasurer's Business Address	7. Designated Record Keeper's Name and Mail Record Keeper)	ing Address (if the committee has a Designated				
Ares Code and Phone	Area Code and Phone					
8, TYPE OF STATEMENT:	APPLICABLE TO INDEPENDENT AND	APPLICABLE TO INDEPENDENT AND				
APPLICABLE TO INDEPENDENT AND POLITICAL	POLITICAL COMMITTEES REGISTERED ON COUNTY LEVEL	POLITICAL COMMITTEES REGISTERED ON				
COMMITTEES REGISTERED ON STATE LEVEL	ON GOOD TO SEE SEE	STATE AND COUNTY LEVEL				
8m. TRIANNUAL STATEMENTS	8d. ANNUAL STATEMENT	8g. AMENDMENT TO CAMPAIGN STATEMENT				
Even Year Odd Year April 25 January 31	(Coverage Year)	(Complete Itam 8a, 8b, 8c 8d, 8e, 8f or 8h				
July 25 July 25	8e. PRE-ELECTION OR	to indicate which Statement is being smended)				
October 25 October 25	8f, POST-ELECTION					
	Pre-Election or Post-Election	8h. DBSOLUTION OF COMMITTEE				
8b. QUARTERLY STATEMENTS	Statement relates to: PRIMARY GENERAL	Effective Date of Dissolution				
CAUCUS COMMITTEES (ONLY) January 31 April 25	CONVENTION SCHOOL					
July 25 October 25	SPECIAL CAUCUS	Month Day Year				
	_	By checking this item, NWe certify that the committee has no easet or outstanding				
8c SPECIAL ELECTION INDEPENDENT	Date of Election, Convention or Caucus:	debiz, including late fling fees. Further, I request that if the dissolution cannot be				
EXPENDITURE REPORT	Month Day Year	granted, that this be considered a request for the Reporting Waiver.				
1		Note: The disposition of residual funds must				
		be reported on Schedule 2B and the Summary Page.				
A committee that does not have a Reporting Walver must file	all required Campaign Statements. The Campaign	in Statements must include all applicable the \$1,000 Reporting Walver threshold. If any				
A commisse that does not have a Reporting Ventor that the children and outstanding debts count against the \$1,000 Reporting Walver threshold. If any Schedules. Direct contributions, in-kind contributions, losers, expenditures and outstanding debts count against the \$1,000 Reporting Walver threshold. If any of the information listed in items 2, 4, 5, 6 or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to						
of the information listed in items 2, 4, 5, 6 or 7 has changed since the information was surely or a Reperting Walver in not received an or hadron the filling the Statement of Crystalization structure will be Company to Construct the required for a Reperting Walver in not received an or hadron the filling deadline of a required campaign statement, that campaign statement can not be walved.						
9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached scriptules (if any) and to the best of my						
knowledge and belief the contents are true, accurate and complete.						
Current Tressurer or Ossignated Record Keeper						
Type or Print Name						

1. Committee I.D. Number	1370	<u>>0850</u>	<u> </u>
2. Committee Name C.T. FER	RESE	CHSIVE	+

SUMMARY PAGE INDEPENDENT OR POLITICAL COMMITTEE

INDEPENDENT OR POLITICAL COMMITTEE	E(141025 40°)			
RECERTS	Column I This Period	Column II Cumulative for Calendar Year		
3. Contributions		-		
e, Itemized Contributions (Schedule 2A, Column 6 + Schedule 2A-2, Column 8	(3a) 5			
b. Uniternized (less than \$20,01 each - no Schedule)	(3b.) \$ NOT APPLICABLE			
c. Subtotal of "Contributions"	(3c.) \$	(18.)5		
4. Other Receipts (Schedule 2A-1, Column 6)	(4.) \$	(19.)\$		
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add line 3c + Line 4) IN-KIND CONTRIBUTIONS	(5.) \$	(20.)\$		
6. In-Kind Contributions a. Itemizad (Schedule 2-IK, Column ?)	(62) \$			
b. Uniterrized (less then \$20.01 each - no Schedule)	(6b.) \$_NOT_APPLICABLE			
7. TOTAL IN KIND CONTRIBUTIONS (Add Line Se + Line Sb) EXPENDITURES	(7.) \$	(21.)\$		
8. Expenditures a. Itemized Direct (Schedule 2B, Column 7)	(8a) \$ 250.00			
b. Itemized Get-Out-the-Vote (Schedule 8-G, Column 6)	(8b.) \$			
 c. In-Kind Expenditures- Purchase of Goods or Services (Schedule 28-2, Column 7) 	(8c.) \$			
d. Uniternized (less than \$50.01 each - no Schedule)	(8d.) \$			
e. Subtotal of Expenditures	(8c.) \$	(22.)\$		
9. Independent Expenditures (Schedule 28-1, Column 7)	(9.) \$	(23.)\$		
10. TOTAL EXPENDITURES (Add Line 8e * Line 9) IN-IOND EXPENDITURES	(10.) \$	(24.)\$		
11.In-Kind Expenditures Endorsements, Donations or Losns of Goods or Services (Schedule 28-2, Column 8) DESTS AND OBLIGATIONS	(11.)\$	(25.)\$		
12. Debts and Obligations a. Owed by the Committee (Schedule 2E)	(12a.)5614_00			
b. Owed to the Committee (Schedule ZE) BALANCE STATEMENT	(126.) \$			
PATION C 0 IV) SHEW I				
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.)\$ 418 08			
14, Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I)	(14.)+			
15. SUBTOTAL Add lines 13 and 14	(15.) = 418,08			
16. Amount expended during reporting period (Line 10, Total Expenditures - Column I)	(16.)			
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.)\$ 168.08			

[&]quot;If your ending balance is negative, please recheck your math.



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

Debt #1 Owed to or by.

Debt #2 Owed to or by:

Debt #3

JAMES

DEBTS AND OBLIGATIONS SCHEDULE 2E POLITICAL OR INDEPENDENT COMMITTEE

If bank toan, name of endorser or guerantor.

DEBTS AND OBLIGATIONS		מת רייבים מיי רייבים	~0E	_
SCHEDULE 2E POLITICAL OR INDEPENDENT COMMITT		T. FOR RESP		
This Schedule itemizes: a. Debts and obligations owed by or forgiven the c		Debts and obligations		
B. Name and mailing Address of person, vendor or insucial institution to whom debt is owed. Check box to indicate whether debt is owed to an occupanted business. If debt is a bank loan, please provide information regarding the endorsers or pusientors, if any.	4. Type of Obligation (indicate type) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Salance at close of this period (Item 6 minus item 8)
Corp? Yee Owed Dorby JAMES ULINSKI S9755 RIVERCREST H.T. MI. 48045	4. Type: 5. Date Debt Was Insured: 10 - 77 - 04 6. Original Amount of Debt. \$ 616.	2/1/0% 250.00 1/ \$ 1/ \$ 1/ \$	250. ⁶⁰	364,00
f bank loan, name of endorser or guarantor.		Amo	unt Endorsed: \$	
Debt #2 Corp? Yes	4. Type:	8 15 PAS 1000	1000	248,00
JAMES ULINSKI SAME AS ABOYE	5. Date Debt Was Jacqured: 6/23/04- 6. Ortoinal Amount of Debt \$_1748			FORGIVEN
	1	Ame	l ount Endorsed: \$_	·
f bank loan, name of endorser or guarantor:	T	7411		
Debt #3 Corp? Yes Owed to or by:	4. Type: 5. Date Dake Was Incurred:			
			Į.	I

Page Subtotal (Outstanding debt)

Grand Total of all Schedules 2E (Complete on last page of Schedule showing amounts owed by or to the committee.)

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of

this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by", or line 12b owed to of the Summary Page

614.

FORGIVEN

00

Page ____ of ____

6. Original Amount of Date:

Amount Endorsed: \$